

April 26, 2012

April 20, 2010

Testimony for House Bills, 5089 & 5090

Good morning, Madam Chair and members of the Health Policy Committee. It is, indeed, an honor and a privilege to address you this morning and to convey my thoughts on this important legislation.

At the top of this letter, you will notice two dates. This is not a mistake. It is an irony that almost two years ago today, I addressed this very same committee on the very same subject.

So, here I am today, again giving my testimony of why these bills are a necessity to become law and to help our society in many ways.

As with some legislation, bills are made into law based on events that happened from everyday life. These bills are no exceptions. When my wife, Paula, died from ovarian cancer in 2006, we had many used and unused prescriptions drugs leftover. What do you do with them and all the medical supplies that are unused? Well, the normal thing to do, and what you are told to do, is flush them down the toilet so no one else would mistakenly take them.

I have to believe that there are better alternatives than just wasting them. To that end I wish to present the following for your consideration.

I have included two pictures that reflect a couple of day's collections of such drugs/supplies. These drugs/supplies can be used to help sick and dying people be relieved of the pain they suffer when they can no longer afford to buy them. At the end of 2011 the Undersheriff and I held a drug take back at the Sherriff's department in Clare County. Someone dropped off 40 vials of an MS medicine. On the internet, this medicine cost \$800 EACH. That is a \$32,000 supply of medicine that could have been used very productively for our people. That was one day in the small town of Harrison. How many small towns in Michigan? How many bigger towns with more medicines? With the rising costs of all medicines, this practice of disregarding drugs so easily is truly unfortunate but fixable. This pending legislation will go a long way in making that fix a reality.

It was only within the past 5-10 years, that there is hard evidence that drugs flushed down the drain are now seeping into our drinking water. Both in natural ground water and city municipal water systems. This legislation will reduce that and possible even put an end to it.

What I have told you is what today is all about. Making my passion and the needs of many sick and needy people, your passion. This is a Win-Win-Win situation for everyone. What these bills will do is:

- Keep drugs out of our drinking water.
- Keep unused drugs from being sold on the street.
- Keep unused drugs from entering our landfills.
- Get unused drugs out of people houses so kids can't have access to them.
- Get unused drugs out of homes to protect the elderly in taking the wrong medicines.
- Get unused drugs out of houses so predators won't break in and steal them.
- Get unused prescription drugs to people who cannot afford them.
- Protects manufacturer and giving citizens. (Good Samaritan Law)
- Inspection of all drugs before disbursement. (Registered Pharmacist)

As the bill stands today is not the way I envisioned it. My vision was to let all people participate in the program. Not just 'professional' institutions. That was left out of this bill. But this is a good start. I will be back to support the fact that many, many people have prescription drugs that can be reused using stringent safety procedures.

I know the pharmaceuticals companies have reasons not to let private individuals turn in their drugs. I don't know what they are afraid of. Declining sales? Hardly. People that will use these available drugs will not have insurance to buy them in the first place. Are they worried about people not storing them properly? Have you ever wondered about the transportation system involved after a drug is made in a factory waiting for shipment, shipped a crossed country for, perhaps, days in an unrefrigerated truck, (or worse yet, sitting in a truck under a blazing sun where temperatures can reach 160 degrees F), sitting in a warehouse awaiting delivery to the drug store and then sitting on the shelf till used. I can see several issues with that process as well.


But when 35 other states have laws on their books addressing this issue, it is past time that Michigan should have one. I brought a binder with me today that contains all those laws. Do we want to be the last State? Or do we want to be the state with the most modern, up to date version?

I understand that Community Health will have to write the rules for this program to work. I am offering myself and several other people to assist them in making this happen. I truly believe you need to have representation from the very people that need to find a place for these drugs/supplies and that can easily make them available.

I, we, are willing to make this happen. It starts with this committee. And, after careful consideration, I urge you to speed it through the legislation process. Thank you very much for your time and attention.

God's Blessings,

Tom Pirnstill


tpirnstill@sbcglobal.net

PO Box 498

Lake, MI 48632

989-544-3790